

By signing below, you agree, warrant and covenant as follows:

PARTICIPANT CONSENT, WAIVER AND RELEASE FROM LIABILITY

Longevity Personal Training LLC (“LPT”)

I acknowledge that participating in LPT’s outdoor trail adventure hike (the “Adventure Hike”) involves an above-average risk of personal injury and death to me and my property, and I knowingly and voluntarily agree to the terms and conditions outlined in this Waiver and Release from Liability. In exchange for being permitted to participate I agree to the following:

I am over 18 years of age, in good health and have no physical conditions that affect my ability to participate in the Adventure Hike and have not been advised otherwise by a medical practitioner. I am covered by medical insurance, individually or as part of an organization.

I understand that, in participating in the Adventure Hike, I will be engaged in outdoor activity, exposed to the elements, and away from urban areas. I also understand there are inherent hazards connected to such activity, including, but not limited to: falls, falling trees/rocks, sprains, strains, and broken bones, dehydration, poisonous and/or venomous plants and animals, exposure to the elements, cuts and other injuries from use of tools, improper behavior by other participants and other accidental injury, both foreseeable and unforeseeable. I UNDERSTAND THAT AS A CONSEQUENCE OF RISKS ASSOCIATED WITH OUTDOOR ACTIVITY, AND THE TRAVEL TO SUCH EVENTS, THAT I MAY SUFFER SERIOUS INJURIES UP TO AND INCLUDING DEATH.

I agree to wear appropriate safety equipment, as established by common safety practices during the Adventure Hike and all related activities. I acknowledge that, in advance of the Adventure Hike, LPT provided me and I familiarized myself with a list of recommended clothing, equipment and supplies (“Recommended Gear”) to enable me to fully and safely participate in the Adventure Hike. I acknowledge that I have assumed all responsibility to supply myself with all Recommended Gear. I further acknowledge that I am solely responsible for assuring that my Recommended Gear is in good working condition and order.

I assume all risks associated with my participation in the Adventure Hike, and the risk of injury caused by the condition of any property, facilities or equipment used, including my Recommended Gear, which may not be foreseeable by anyone at any time. In connection with any injury or other medical conditions I may experience during the Adventure Hike, I authorize medical treatment deemed necessary by medical personnel if I am not able to act on my own behalf.

Understanding all the above risks of injury and that those and other risks (including travel) are the ordinary risks associated with outdoor activity, I hereby RELEASE, DISCHARGE, AND AGREE TO HOLD HARMLESS, INDEMNIFY AND NOT TO SUE LPT, its employees, agents, officers and/or members for any injuries, losses, damages, claims, liabilities or expenses that are caused or alleged to be caused by my participation in the Adventure Hike.

I give permission to LPT to use my biography, name and likeness in connection with publicity, advertising and promotions. I waive any right that I may have to inspect or approve any finished product.

This Waiver is a legally binding agreement and will be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. Any provisions found to be void or unforeseeable shall be severed from this agreement, and not affect the validity or enforceability of any other provisions.

I have read this document and I understand its content. I understand that by signing below, I have given up substantial rights.

I have voluntarily signed this release.

Print Name _____

Signature _____ Date _____

Parent or Legal Guardian

[If a minor child is participating in the Adventure, a parent or legal guardian must sign on behalf of the minor child]

PRINT AND FILL OUT THIS LAIBILITY WAIVER IN ADVANCE